

**Kansas Department of Health and Environment
2001-2002 Lead Survey**

Introduction and Respondent Selection

[Interviewer read]: Hello, my name is [your name]. I'm calling from the Kansas Department of Health and Environment. We're conducting a special study about the prevention of lead poisoning, and I have a few questions to see if your household qualifies for our study.

Is this (phone number) ?

If "no" Thank you very much, but I seem to have dialed the wrong number. It's possible that your number may be called at a later time. **Stop**

Is this a private residence?

If "no" Thank you very much, but we are only conducting our survey among private households. **Stop**

Because lead poisoning is a special concern for young children, many of our questions will focus on children under age 6 years in your household. How many children under age 6 live in your household?

 Enter # of children

If "none" Thank you very much, but we are only conducting our survey among households with children under age 6. **Stop**

We also need to randomly select one adult in your household to be interviewed. How many members of your household, including yourself, are 18 years of age or older?

 Enter # of adults

If # of adults > 1, proceed

If # of adults is "1" Are you the adult?

If "yes" Then you are the person I need to speak with. **Enter 1 man or 1 woman below (Ask gender if necessary). Go to last introduction paragraph.**

If "no" Is the adult a man or a woman? **Enter 1 man or 1 woman below. May I speak with [fill in (him/her) from previous question]? Go to "To correct respondent".**

If # of adults >1

The [randomly selected adult] has been chosen randomly to be

interviewed. Is this adult a male or a female?

Is he/she available?

[If selected respondent is person who answered phone, skip the next paragraph.]

To correct respondent

HELLO, I'm (name) calling for the Kansas Department of Health and Environment. We're conducting a special study about prevention of lead poisoning.

[If more than one adult in household read:] You have been chosen randomly to be interviewed.

The information we collect will be used to improve health and services related to lead poisoning prevention. I won't ask for your name, address, or other personal information that can identify you. You don't have to answer any question you don't want to, and you can end the interview at any time. The interview takes a short time and any information you give me will be confidential. If you have any questions about this survey, I will provide a toll free telephone number for you to call to get more information.

First, I have just a few questions about your home.

1. Do you live in a residence built before 1978?

- 1 Yes
- 2 No **Skip to Q10**
- 7 Don't know / not sure **Skip to Q10**
- 9 Refused **Skip to Q10**

2. Was this residence built before 1950?

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

3. Does your residence have any peeling or chipping paint?

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

4. Has your residence undergone any remodeling or renovation within the past 12 months?

Examples of remodeling or renovation include: replacing or installing, scraping, patching, hand or power sanding, or power washing or sand blasting doors, windows, walls, or other building components; tearing down porches, walls, or other building components; or use of torches or a heat gun on a high temperature setting.

- 1 Yes
- 2 No **Skip to Q8**
- 7 Don't know / not sure **Skip to Q8**
- 9 Refused **Skip to Q8**

5. Did you pay a professional contractor to do this work, or was it done by someone in your household or a friend or family member or by a non profit organization or group?

- 1 Contractor
- 2 Someone in household / friend / family member **Skip to Q7**
- 3 Both contractor and someone in household / friend / family member
- 4 Non profit organization or group
- 7 Don't know / not sure **Skip to Q8**
- 9 Refused **Skip to Q8**

6. Did the contractor or non profit organization provide you with a copy of the pamphlet "Protect Your Family from Lead in Your Home" as well as a renovation notice?

- 1 Yes, provided both
- 2 Pamphlet only
- 3 Renovation notice only
- 4 No, neither
- 7 Don't know / not sure
- 9 Refused

If Q5 = "Contractor" or "Non profit organization" skip to Q8

7. What precautions did you take to protect you and your family from lead hazards while remodeling?

Do not read

Mark all that apply

- 1 Wet sanding or wet mopping surfaces
- 2 Use of a high-efficiency particulate (HEPA) vacuum cleaner
- 3 Wearing a respirator (not a dust mask)
- 4 Showering immediately after finishing work
- 5 Washing work clothes separately
- 6 Wearing disposable coveralls
- 7 Using plastic drop cloths on floors
- 8 Restricting children from remodeling activities and areas
- 9 Moving family and/or small children to another residence
- 10 Other (specify:_____)
- 88 None
- 77 Don't know / not sure
- 99 Refused

8. Have you ever had your home tested for lead?
[If "Yes", probe for how long ago.]

- 1 Within the past 6 months (any time less than 6 months ago)
- 2 Within the past year (6 months to less than 1 year ago)
- 3 Within the past 2 years (1 year to less than 2 years ago)
- 4 Within the past 3 years (2 years to less than 3 years ago)
- 5 3 or more years ago
- 6 Never **Skip to Q10**
- 7 Don't know / not sure **Skip to Q10**
- 9 Refused **Skip to Q10**

9. What is the main reason your home has been tested for lead?
- 1 When purchased home
 - 2 When rented home
 - 3 As a result of child's elevated blood lead level
 - 4 Previous owner had it tested
 - 5 Government funded rehabilitation project
 - 6 Other (specify: _____)
 - 7 Don't know / not sure
 - 9 Refused
10. Are you aware that there are certified professionals available in Kansas to provide lead testing in homes?
- 1 Yes
 - 2 No
 - 7 Don't know / not sure
 - 9 Refused
11. Are you aware that there are certified professionals available in Kansas to provide lead abatement, or the permanent elimination of lead-based paint, in homes?
- 1 Yes
 - 2 No
 - 7 Don't know / not sure
 - 9 Refused
12. Previously, you indicated there were [insert number here] children in your household under the age of 6 years. The [randomly selected -- oldest, second oldest, etc.] child has been randomly selected for these next few questions. What is the age of the [randomly selected -- oldest, second oldest, etc.] child?
[Note: If less than one month, round up to one month.]
- 1 ____ Age in months
 - 2 ____ Age in years
 - 7 7 7 Don't know/not sure
 - 9 9 9 Refused
13. What is the gender of the [randomly selected] child?
- 1 Male
 - 2 Female
 - 7 Don't know/not sure

9 Refused

14. How is the [randomly selected] child related to you?

- 1 Daughter **Skip to Q16**
- 2 Stepdaughter
- 3 Son **Skip to Q16**
- 4 Stepson
- 5 Brother or Stepbrother
- 6 Sister or Stepsister
- 7 Grandson
- 8 Granddaughter
- 9 Other
- 77 Don't know / not sure
- 99 Refused

15. Are you the guardian of this child?

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

16. Other than your own home, does the [randomly selected] child spend at least 6 hours per week at any residences built before 1978?

- 1 Yes
- 2 No **Skip to Q19**
- 7 Don't know / not sure **Skip to Q19**
- 9 Refused **Skip to Q19**

17. Do any of these residences have peeling or chipping paint?

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

18. Have any of those residences undergone any remodeling or renovation within the past 12 months? Examples of remodeling or renovation include: replacing or installing, scraping, patching, hand or power sanding, or power washing or sand blasting doors, windows, walls, or other building components; tearing down porches, walls, or other building components; or use of torches or a heat gun on a high temperature setting.

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

19. Is the [randomly selected] child cared for in a childcare center or childcare home?

- 1 Yes
- 2 No **Skip to Q21**
- 7 Don't know / not sure **Skip to Q21**
- 9 Refused **Skip to Q21**

20. Has the [randomly selected] child's care provider ever provided information to you regarding lead-based paint? Information provided includes: whether or not the childcare center or home has been tested for lead based paint, whether or not children in the center or home have ever been tested for lead poisoning, or receiving educational material related to childhood lead poisoning from the child's care provider.

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

21. Do any adults in your household have occupations or hobbies that could expose them to lead? Examples include such things as automobile radiator repair, home repair/remodeling, battery or smelting plant worker, heavy metal welder, stained glass, reloading shotgun shells, or making fishing weights.

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

22. Has a health care provider ever talked to you about childhood lead poisoning such as discussing how your child's diet can reduce the risk of lead poisoning, the need to get your child tested for lead, or provided you with educational materials on childhood lead poisoning?

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

23. Has the [randomly selected] child ever been tested for lead poisoning?
[If "Yes", probe for how long ago the **last** test was done.]
- 1 Within the past 6 months (any time less than 6 months ago)
 - 2 Within the past year (6 months to less than 1 year ago)
 - 3 Within the past 2 years (1 year to less than 2 years ago)
 - 4 Within the past 3 years (2 years to less than 3 years ago)
 - 5 3 or more years ago
 - 6 Never **Skip to Q28**
 - 7 Don't know / not sure **Skip to Q28**
 - 9 Refused **Skip to Q28**
24. The last time the [randomly selected] child was tested for lead, was the blood sample taken from an arm, a finger, an ear, a heel, a toe, or some other place?
- 1 Arm
 - 2 Finger
 - 3 Ear
 - 4 Heel
 - 5 Toe
 - 6 Other
 - 7 Don't know / not sure / can't remember
 - 9 Refused
25. Has the [randomly selected] child ever had an abnormal blood lead test?
- 1 Yes
 - 2 No **Skip to Q27**
 - 7 Don't know / not sure
 - 9 Refused

If no blood lead tests done within the past 12 months (Q23 = 3, 4, or 5), skip to Q27.

26. Within the past 12 months, were the results of any of the blood lead tests abnormal?
- 1 Yes
 - 2 No
 - 7 Don't know / not sure
 - 9 Refused
27. Where was the last lead test done?
- 1 Doctor's office or HMO

- 2 Health department
 - 3 A clinic or health center
 - 4 Hospital
 - 5 ER or urgent care center
 - 6 Health fair or other special event
 - 8 Other (specify:_____)
 - 7 Don't know / not sure
 - 9 Refused
28. Has the [randomly selected] child ever had a sibling or playmate that has ever had lead poisoning?
- 1 Yes
 - 2 No
 - 7 Don't know / not sure
 - 9 Refused
29. In the last year, have you seen or heard advertisements on radio, TV, newspaper, billboards, flyers, banners, place mats, coloring books or toys regarding lead poisoning prevention?
- 1 Yes
 - 2 No
 - 7 Don't know / not sure
 - 9 Refused
30. Do you have regular access to the World Wide Web using a computer, either at home, at the library, or some other place?
- 1 Yes
 - 2 No
 - 7 Don't know / not sure
 - 9 Refused
31. What is your primary source for health related information?
- 1 Newspaper
 - 2 Radio
 - 3 Television
 - 4 Magazines
 - 5 Web sites
 - 6 Doctor or other health professional
 - 7 Local health department

- 8 Educational materials or handouts
- 9 Personal references (friends, family, or neighbors)
- 10 Other (specify:_____)
- 88 None
- 77 Don't know / not sure
- 99 Refused

32. Have you ever been contacted by the Kansas Childhood Lead Poisoning Prevention Program?

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

33. Would you like to have their toll free number or website address?

If "yes" 1-888-291-2821 or www.kdhe.state.ks.us/lead

Demographics

Finally, I have just a few demographic questions for statistical purposes.

34. What is your age?

- Code age in years
- 0 7 Don't know / not sure
- 0 9 Refused

35. Are you Hispanic or Latino?

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

36. Which one or more of the following would you say is your race? Would you say: White, Black or African American, Asian, Native Hawaiian or other Pacific Islander, American Indian or Alaska Native, or Other?

Mark all that apply

- 1 White
- 2 Black or African American
- 3 Asian
- 4 Native Hawaiian or other Pacific Islander
- 5 American Indian or Alaska Native
- 6 Other (specify:_____)
- 8 No additional choices
- 7 Don't know / not sure
- 9 Refused

If more than one response to Q36, continue with Q37. Otherwise go to Q38.

37. Which one of these groups would you say best represents your race?

- 1 White
- 2 Black or African American
- 3 Asian
- 4 Native Hawaiian or other Pacific Islander
- 5 American Indian or Alaska Native
- 6 Other (specify:_____)
- 7 Don't know / not sure

9 Refused

38. Is the [randomly selected] child Hispanic or Latino?

- 1 Yes
- 2 No
- 7 Don't know / not sure
- 9 Refused

39. Which one or more of the following would you say is the race of the [randomly selected] child? Would you say: White, Black or African American, Asian, Native Hawaiian or other Pacific Islander, American Indian or Alaska Native, or Other?

Mark all that apply

- 1 White
- 2 Black or African American
- 3 Asian
- 4 Native Hawaiian or other Pacific Islander
- 5 American Indian or Alaska Native
- 6 Other (specify:_____)
- 8 No additional choices
- 7 Don't know / not sure
- 9 Refused

If more than one response to Q39, continue with Q40. Otherwise go to Q41.

40. Which one of these groups would you say best represents the race of the [randomly selected] child?

- 1 White
- 2 Black or African American
- 3 Asian
- 4 Native Hawaiian or other Pacific Islander
- 5 American Indian or Alaska Native
- 6 Other (specify:_____)
- 7 Don't know / not sure
- 9 Refused

41. Are you: married, divorced, widowed, separated, never married, or a member of an unmarried couple?

- 1 Married
- 2 Divorced

- 3 Widowed
- 4 Separated
- 5 Never married
- 6 Member of an unmarried couple
- 9 Refused

42. What is the highest grade or year of school you completed?

Read only if necessary

- 1 never attended school or only attended kindergarten
- 2 Grades 1 through 8 (elementary)
- 3 Grades 9 through 11 (some high school)
- 4 Grade 12 or GED (high school graduate)
- 5 College 1 year to 3 years (some college or technical school)
- 6 College 4 years or more (college graduate)
- 9 Refused

43. Are you currently: employed for wages, self-employed, out of work for more than 1 year, out of work for less than 1 year, a homemaker, a student, retired, or unable to work?

- 1 Employed for wages
- 2 Self-employed
- 3 Out of work for more than 1 year
- 4 Out of work for less than 1 year
- 5 Homemaker
- 6 Student
- 7 Retired
- 8 Unable to work
- 9 Refused

44. Is your annual household income from all sources:

Read as appropriate

- 0 4 Less than \$25,000 If "no," ask 05; if "yes," ask 03 (\$20,000 to less than \$25,000)
- 0 3 Less than \$20,000 If "no," code 04; if "yes," ask 02 (\$15,000 to less than \$20,000)
- 0 2 Less than \$15,000 If "no," code 03; if "yes," ask 01 (\$10,000 to less than \$15,000)
- 0 1 Less than \$10,000 If "no," code 02
- 0 5 Less than \$35,000 If "no," ask 06 (\$25,000 to less than \$35,000)
- 0 6 Less than \$50,000 If "no," ask 07

- (\$35,000 to less than \$50,000)
0 7 Less than \$75,000 If "no," code 08
(\$50,000 to less than \$75,000)
0 8 \$75,000 or more

- Do not read the following responses
7 7 Don't know/Not sure
9 9 Refused

45. What county do you live in?

- _ _ _ FIPS county code
7 7 7 Don't know/Not sure
9 9 9 Refused

46. Do you have more than one telephone number in your household? Do not include cell phones or numbers that are only used by a computer or fax machine?

- 1 Yes
2 No **Skip to Q48**
7 Don't know / not sure **Skip to Q48**
9 Refused **Skip to Q48**

47. How many of these are residential numbers?

- _ Residential telephone numbers [6 = 6 or more]
7 Don't know / not sure
9 Refused

48. Indicate sex of respondent. Ask only if necessary

- 1 Male
2 Female